

	<p>RESTRICTIVE PHYSICAL INTERVENTION POLICY</p>
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Frequency of review:	Annual
Next review date:	Summer 2020
Lead:	Curriculum Committee

1. INTRODUCTION

At Arnett Hills school we believe that pupils need to be safe, to know how to behave, and to know that the adults around them are able to manage them safely and confidently. Only for a very small minority of pupils will the use of physical intervention be needed. On such occasions, acceptable forms of intervention are used.

The vast majority of pupils behave well and conform to the expectations of our school. We have responsibility to operate an effective behaviour policy that encompasses preventative strategies for tackling inappropriate behaviour in relation to the whole school, each class, and individual pupils.

All school staff need to feel that they are able to manage inappropriate behaviour, and to have an understanding of what challenging behaviours might be communicating. They need to know what options are available for managing behaviour, and they need to be free of undue worries about the risks of legal action against them if they use appropriate physical intervention. Parents need to know that their children are safe with us, and they need to be properly informed if their child is the subject of a Restrictive Physical Intervention, including the nature of the intervention, and the rationale for its use.

2. DEFINITION OF “RESTRICTIVE PHYSICAL INTERVENTION”

“Restrictive Physical Intervention” is the term used to describe interventions where bodily contact using force is used to control or manage a child’s behaviour. It refers to any instance in which a teacher or other adult authorised by the Headteacher has to use “reasonable force” to control or restrain pupils in circumstances that meet the following legally defined criteria.

- To prevent a child from committing a criminal offence (*this applies even if the child is below the age of criminal responsibility*)
- To prevent a child from injuring self or others
- To prevent or stop a child from causing serious damage to property (*including the child’s own property*)
- To stop the child from engaging in any behaviour which is prejudicial to maintain the good order and discipline at the school.

There is no legal definition of “reasonable force”. However, there are two relevant considerations:

- the use of force can be regarded as reasonable only if the circumstances of an incident warrant it;
- the degree of force must be in proportion to the circumstances of the incident and the seriousness of the behaviour or consequences it is intended to prevent.

The definition of physical force also includes the use of mechanical devices (eg splints on the pupil prescribed by medical colleagues to prevent self-injury), forcible seclusion or use of locked doors. It

is important for staff to note that, although no physical contact may be made in the latter situations, this is still regarded as a Restrictive Physical Intervention.

3. WHEN THE USE OF RESTRICTIVE PHYSICAL INTERVENTIONS MAY BE APPROPRIATE IN ARNETT HILLS SCHOOL

Restrictive Physical Interventions will be used when all other strategies have failed, and therefore only as a last resort. However there are other situations when physical handling may be necessary, for example in a situation of clear danger or extreme urgency. Certain pupils may become distressed, agitated, and out of control, and need calming with a brief Restrictive Physical Intervention that is un-resisted after a few seconds.

The safety and well-being of all staff and pupils are important considerations. Under certain conditions this duty must be an over-riding factor.

WHO MAY USE RESTRICTIVE PHYSICAL INTERVENTION IN ARNETT HILLS SCHOOL

The following staff (as well as the teachers employed at the school) are authorised by the Headteacher to have control of pupils, and **must** be aware of this Policy and its implications. However, non-inclusion on this list does not mean that an adult is necessarily barred from using physical intervention. If the Head has lawfully placed an adult in charge of children then that adult will be entitled to use restrictive physical intervention

We take the view that staff should not be expected to put themselves in danger and that removing other pupils and themselves from risky situations may be the right thing to do. We value staff efforts to rectify what can be very difficult situations and in which they exercise their duty of care for the pupils.

Names of Authorised staff

Headteacher
Deputy Headteacher
Class teachers
Learning Support Assistants
PPA teachers
Admin staff
Caretaker

TEMPORARY AUTHORISATION

PARENT HELPERS ON A TRIP, CENTRALLY EMPLOYED SUPPORT STAFF (SEE SCHOOL'S GUIDANCE LEAFLET).

4. PLANNING FOR THE USE OF RESTRICTIVE PHYSICAL INTERVENTIONS IN ARNETT HILLS SCHOOL

Staff will use the minimum force needed to restore safety and appropriate behaviour.

The principles relating to the intervention are as follows :-

- Restrictive Physical Intervention is an act of care and control, not punishment. It is never used to force compliance with staff instructions
- Restrictive Physical Intervention will only be used in circumstances when one or more of the legal criteria for its use are met
- staff will only use it when there are good grounds for believing that immediate action is necessary and that it is in the pupil's and/or other pupil's best interests for staff to intervene physically.

- staff will take steps in advance to avoid the need for Restrictive Physical Intervention through dialogue and diversion. The pupil will be warned, at their level of understanding, that Restrictive Physical Intervention will be used unless they cease the unacceptable behaviour
- only the minimum force necessary will be used
- staff will be able to show that the intervention used was a reasonable response incident
- every effort will be made to secure the presence of other staff, and these staff may act as assistants and/or witnesses
- as soon as it is safe, the Restrictive Physical Intervention will be relaxed to allow the pupil to regain self-control
- a distinction will be maintained between the use of a one-off intervention which is appropriate to a particular circumstance, and the using of it repeatedly as a regular feature of school policy
- escalation will be avoided at all costs, especially if it would make the overall situation more destructive and unmanageable
- the age, understanding, and competence of the individual pupil will always be taken into account
- in developing APDRs, consideration will be given to approaches appropriate to each pupil's circumstance
- procedures are in place, through the pastoral system of the school, for supporting and debriefing pupils and staff after every incident of Restrictive Physical Intervention, as it is essential to safeguard the emotional well-being of all involved at these times.

5. ACCEPTABLE FORMS OF INTERVENTION IN ARNETT HILLS SCHOOL

- There are occasions when staff will have cause to have physical contact with pupils for a variety of reasons, for example:
 - ❑ to comfort a pupil in distress (so long as this is appropriate to their age);
 - ❑ to gently direct a pupil;
 - ❑ for curricular reasons (for example in PE, Drama etc);
 - ❑ in an emergency to avert danger to the pupil or pupils;
 - ❑ in rare circumstances, when Restrictive Physical Intervention is warranted.
- In all situations where physical contact between staff and pupils takes place, staff must consider the following:
 - ❑ the pupil's age and level of understanding;
 - ❑ the pupil's individual characteristics and history;
 - ❑ the location where the contact takes place (it should not take place in private without others present).

Physical contact is never made as a punishment, or to inflict pain. All forms of corporal punishment are prohibited. Physical contact will not be made with the participants neck, breasts, abdomen, genital area, other sensitive body parts, or to put pressure on joints. It will not become a habit between a member of staff and a particular pupil.

6. DEVELOPING A POSITIVE HANDLING PLAN IN ARNETT HILLS SCHOOL

If a pupil is identified for whom it is felt that Restrictive Physical Intervention is likely, then a Positive Handling Plan will be completed. This Plan will help the pupil, the pupil's peer group and staff to avoid difficult situations through understanding the factors that influence the behaviour and

identifying the early warning signs that indicate foreseeable behaviours that may be developing. The plan should also take into account the impact on other pupils and any follow up support they or the child may require. The plan will include :-

- ❑ involving parents/carers and pupils to ensure they are clear about what specific action the school may take, when and why
- ❑ a risk assessment to ensure staff and others act reasonably, consider the risks, and learn from what happens
- ❑ a record to be kept in school of risk reduction options that have been examined and discounted, as well as those used
- ❑ Techniques for managing the pupil's behaviour i.e. strategies to de-escalate a conflict, and stating at which point a Restrictive Physical Intervention may be used
- ❑ identifying key staff who know exactly what is expected. It is best that these staff are well known to the pupil
- ❑ ensuring a system to summon additional support
- ❑ identifying training needs
- ❑ seeking medical advice about the safest way to hold a child with specific medical needs

Please refer to the Appendix for a Physical Handling Plan Pro-forma

7. GUIDANCE AND TRAINING FOR STAFF

Training in practical techniques of physical intervention may be required for staff where there is a significant likelihood of them needing to intervene physically due to the nature of the pupil (or pupils) that they are working with. Where there is an identified need for such training, staff will be trained by an approved instructor. *(NB there is no legal requirement for staff to be trained in the use of practical techniques so staff may exercise their legal right to physically intervene even if they have not had such training. However, they would still need to demonstrate that their intervention was reasonable and proportionate).*

8. COMPLAINTS

It is intended that by adopting this policy and keeping parents and governors informed we can avoid the need for complaints. All disputes which arise about the use of force by a member of staff will be dealt with according to Child Protection and Safeguarding policies.

ANNEX1.

Positive Handling Plan

For assessing and managing foreseeable risks for children who are likely to need Restrictive Physical Intervention

School:

Name of Child:

Class group:

Name of teacher:

Name of parents/Carers:

Name of Support Service Member/s:

Identification of Risk	
Describe the foreseeable risk (ie what specific behaviours have occurred)	
Is the risk potential or actual? (ie has this happened before)	
List who is affected by the risk	
Assessment of Risk	
In which situations does the risk occur?	
How likely it is that the risk will arise? (ie how often has it happened before)	
If the risk arises, who is likely to be injured or hurt?	
What kinds of injuries or harm are likely to occur?	
How serious are the adverse outcomes?	

Assessment completed by:

Signature:

Date:

Agreed Positive Handling Plan and School Risk Management Strategy

Focus of Measures	Measures to be employed	Level of risk
Proactive interventions to prevent risks		
Early interventions to manage risks		
Reactive interventions to respond to adverse outcomes		

Agreed by:

Date:

.....
(Parent/carer)

.....

.....
(Child - if appropriate)

.....
(Headteacher)

.....
(Class teacher)

.....
(Support Service Member/s)

.....

Communication of Positive Handling Plan and School Risk Management Strategy

Plans and strategies shared with:	Communication Method	Date Actioned

Staff Training Issues

Identified training needs	Training provided to meet needs	Date training completed

Evaluation of Positive Handling Plan and School Risk Management Strategy

Measures set out	Effectiveness in supporting the child	Impact on risk
Proactive interventions to prevent risks		
Early interventions to manage risks		
Reactive interventions to respond to adverse outcomes		

ACTIONS FOR THE FUTURE

Plans and strategies evaluated by:

Title:

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Date:

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